

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|---------------|----------------|
| FEE DETERMINATION | <i>rw</i> | <i>68904</i> | <i>4/6/00</i> |
| O.I.P.E. CLASSIFIER | | <i>10</i> | <i>4-12-00</i> |
| FORMALITY REVIEW | | <i>6-4-00</i> | <i>6-2-00</i> |
| RESPONSE FORMALITY REVIEW | | <i>6-4-00</i> | <i>8-3-00</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
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| Claim | Date |
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| Claim | Date |
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| Final | |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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